OFFICE OF THE CITY CLERK 650-595-7413

APPLICATION FOR COMMISSIONS/BOARDS/ or a TASK FORCE

Date:				
Position applied for:				
Name:				
Last	First		Middle	
Present address:	Phone	e: (Hm)	(Bus)	
Email address:				
How long have you lived in Beln	nont?			
Present employer:				
Address:				
Position:				
	ed there?			
Educational background:				
Specific knowledge of skills appl	icable to position:			
Have you ever served as a memb				
Name(s) of Board(s), Cor	mmission(s) or Task Force((s):		
How long?		-		

Present and Previous Community or Civic Involvement:
Explain briefly why you are applying for this position:
What do you hope to accomplish?
What do you hope to decomption.
Would you be interested in serving on any other Belmont Commission, Board or Task Force?
Email Address:
I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.
I authorize you to communicate with references, employers and schools.
Signed: Date:
Indicate preference for any evening interview:
First Choice Second Choice:
Please mail or submit this application to the City Clerk's Office (must be RECEIVED by the published deadline).

City Clerk Belmont City Hall 1070 Sixth Avenue, Suite 301 Belmont, CA 94002